

QUALITATIVE ASSESSMENT OF SOCIETAL PREFERENCES FOR MARKET ACCESS OF CANCER DRUGS

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OBJECTIVES: The need and price for cancer drugs will increase while budgets are becoming more constrained. Policy makers need to make hard choices about which drugs are worthwhile. Inclusion of societal preferences in resource allocation is emphasized by academic research and policy makers. This study qualitatively assesses societal preferences for market access of cancer drugs. **METHODS:** Focus group discussions (FGD) with members of the general population in Flanders (Belgium) were organized. Participants were recruited through flyers distributed in the University Hospitals Leuven and social media. First, the topic of budgetary constraints and resource allocation was introduced. Next, introductory statements based on ethical principles were discussed. Hypothetical scenarios were set up to ask people about characteristics of a patient, disease and drug that they would use to prioritize if there is only money to use/treat one of them. FGD were led by one researcher, video and audio recorded, verbatim transcribed and analyzed using thematic framework analysis. FGD were repeated until data saturation. Participants received a compensation of €20. **RESULTS:** Three FGD with six participants were conducted in February 2015. The median age of participants was 43 years (22-65, N=18). When participants are asked to define criteria they would use to prioritize patients, they mention age and life style of a patient and severity of the disease. They prefer to treat the largest patient group with the best prognosis. Drugs would be prioritized by participants based on the effect on quality of life, side effects and treatment duration. **CONCLUSIONS:** Participants would like to maximize the benefits within a restricted budget, but conflicts between criteria such as prognosis and severity of disease and between effect on quality of life and side effects crop up. Further research will quantify the relative importance and the trade-offs between criteria that society is willing to make through a discrete choice experiment.